NSF Form 812 Oct. 99

NATIONAL SCIENCE FOUNDATION and NATIONAL INSTITUTES OF HEALTH Survey of Graduate Students and Postdoctorates in Science and Engineering, Fall 1999

Form approved OMB No. 3145-0062 Appr. Exp. 9/30/2002

DEPARTMI	Due date: January 31, 2000	
ITEMS 1-4. IDENTIFYING INFORMATION	3. Person in department or program preparing this form:	Institution and
1. Institution name:	Name:	department code (LEAVE BLANK)
2. Name of S&E department or program:	Title:	'
If changed since last year, please indicate previous name and whether this represents a merger, split, or expanded program:	Phone: ()	
	E-mail address:	
4. Highest graduate degree available in this department or program (CHECK ONE): ((1) Ph.D.¹ □ (2) Master's □ (3) No Ph.D.¹ or Master's degree offer	ed 🗆

Report all data on a headcount basis (use whole numbers, not fractions, decimals, FTEs, etc.). If your department does not enroll graduate students, please go to item 8.

ITEM 5. NUMBER OF FULL-TIME GRADUATE STUDENTS enrolled for advanced degrees (master's and doctoral) in fall 1999. Report each student only once according to the source and mechanism of the largest amount of support received in fall 1999.

Students receiving equal support from multiple sources or through multiple mechanisms should be reported only once. When determining the largest source of support, consider **all** graduate school academic expenses including tuition, tuition remission, and stipends.

		STUDENTS RECEIVING FINANCIAL ASSISTANCE											SELF-	TOTAL FULL-TIME
		FEDERAL SOURCES (excluding loans)									NON-FEDERAL SOURCES			
MECHANISMS OF SUPPORT			HHS		_					Institutional			STUDENTS (including loans	GRADUATE ENROLL- MENT
		Department of	of	Other HHS	National Science	Department of	NASA	Department of	Other Federal	support (including state & local	Foreign sources	Other U.S.	and family sources)	(Sum of (A) through (L))
	Line	Defense (A)	Health (B)	(C)	Foundation (D)	Agriculture (E)	(F)	Energy (G)	sources (H)	government) (I)	(J)	sources (K)	(L)	(M)
Graduate Fellowships	(1)													
Graduate Traineeships	(2)													
Graduate Research Assistantships	(3)													
Graduate Teaching Assistantships	(4)													
Other Types of Support	(5)													
FULL-TIME TOTAL ²	(6)													
Of the students in line (6), how many in each data cell are WOMEN? ³	(7)													

¹ Or Ph.D. equivalent such as Sc.D. and D.Eng., but not Ed.D., M.D., or other professional degree

² The total from line (6) should be inserted in item 7, line (3), column (K).

³ The total from line (7) should be inserted in item 7, line (2), column (K).

			U.S. CITIZENS AND PERMANENT RESIDENTS										TOTAL
of PART-						ispanic/Latin		ONE RACE	MORE THAN ONE RACE		Unknown	Temporary	(Sum of A
	How many students belong to the following RACIAL/ETHNIC categories? In each line, count each student only once.		Black/ African American (A)	Amer. India or Alaska Native (B)	Asian American	Native Hawaiian/ Pacific Islander (D)	White (E)	ONLY Hispanic/ Latino (F)	Hispanic/ Latino (G)	Non- Hispanic Latino (H)	or did not state	visa holders (J)	through J) (K)
fall 1999, by sex.	MEN ENROLLED PART TIME	(1)											
	WOMEN ENROLLED PART TIME	(2)											
	PART TIME, TOTAL	(3)											
ITEM 7.	MEN ENROLLED FULL TIME	(1)											
RACE/ ETHNICITY of FULL- TIME (Item 5) graduate students in fall 1999, by sex.	WOMEN ENROLLED FULL TIME (column (K) should equal Item 5, line (7), column (M))	(2)											
	FULL TIME, TOTAL (column (K) should equal Item 5, line (6), column (M))	(3)											
	Of the full-time students on line (3), how many are FIRST TIME?	(4)											
	Of the first-time students on line (4), how many are WOMEN?	(5)											
							DOSTD	OCTORATES					
ITEM 8.						SOURCE OF		OCTORATES	ТО		THER NON- FACULTY		
NUMBER OF POSTDOCTORATES AND NON-FACUL' RESEARCH STAFF WITH DOCTORATES in fall 1999						FEDERAL		NON-	fo	· all	Of the total in (E),		RESEARCH STAFF WITH
RESEARCE	Fel	owships (A)	Traineeships (B)	Research gran (C)	fEDERA (D)	(A) thro	rces h bugh (D) E)	now many áre FOREIGN? (F)		OCTORATES (G)			
TOTAL (1)													
Of the total in each cell of line (1), how many are WOMEN? (2)													
Of the total in each cell of line (1), how many hold an M.D., D.O., D.D.S., or D.V.M. degree? (3)													
Approximately how many person hours were required to complete this form? List other Federal sources (agencies), from item 5, column (H), and number of full-time students supported by each:						P	lease explain	variances fro	om the pre	rious year's	s data or include	other comme	nts:
TATILIZET OF TU	п што эшиствэ эцрритей ру васт.					_							